

# Consumer Council News

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**Happy Anniversary VA**  
In July the VA kicked off its 75th anniversary celebration. The Veterans Administration became an independent agency on July 21, 1930. The number of Veterans in VA hospitals in 1930 was 54,000 which has grown to 587,000 in 2004. The visits by veterans for outpatient clinic care was 800,000 in 1930 and in 2004 was 54 million. The budget of the VA was \$3.3 billion in 1930 and has grown to \$757 billion in 2004. See more at: [www.75anniversary.va.gov](http://www.75anniversary.va.gov)

Newsletter sponsored by  
VA Mental Health  
Consumer Council  
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## VA CARE Rated Highly

The July issue of U.S. News and World Report praised VA care was as good as private sector care and possibly better. Among the accomplishment of VA care is the computerized system that reduces medication errors. All drugs carry bar codes, as do patients' ID bracelets. Both are scanned before a medication is administered to make sure the drug and patient match and last minute order changes are caught. The patient record is computerized and doctors and nurses can instantly call up medical records with include test results. There is a reminder system which keys health care professionals into doing preventive care such as vaccinations.

Recently published studies have found that the VA rates much better than Medicare fee-for-service providers in 11 basic measures of

quality, such as regular mammograms and counseling for smokers. The *Annals of Internal Medicine* published a study showing that the VA had "substantially better quality of care" than other provider

in many of nearly 350 indicators of quality, such as screening and treating depression, diabetes, and hypertension. The improvements have been credited to a fundamental change in VA culture. There is an emphasis on patient safety and constantly examining the processes and procedures that go into caregiving. The VA is now looked upon as model that

other health care systems want to emulate.



We Care About Our  
Veterans

## CHALENG REPORT

The Community Homelessness Assessment, Local Education and Networking Groups for Veterans (CHALENG) report has been done since 1993. This is a survey that is distributed by VHA Points of Contact at the various medical facilities and regional offices to assess homeless gaps in service and community responsiveness to the needs. This program was designed to enhance the continuum of services for homeless veterans provided by the local VA medical center and regional office and their surrounding community service agencies.

There were 4,268 responders to the survey and of this number 1,007 were VA staff and 3,111 were local government/community agency participants. Over 625 respondents identified themselves as homeless veterans or formerly homeless veterans. The priorities

have remained constant the last four years and are:

- ⇒ Long-term housing
- ⇒ Dental care
- ⇒ Child care

The report stated there were 530 new interagency collaborative agreements between VA and community agencies developed in 2004. Reported successes included several local permanent housing projects and veterans receiving more dental care under a new directive issued by VA. View a video on CHALENG at [www.va.gov/homeless/page.cfm?pg17](http://www.va.gov/homeless/page.cfm?pg17)

Online Newsletter  
[www.mentalhealth.med.va.gov/cc](http://www.mentalhealth.med.va.gov/cc)

## Model for Depression Care

At the July, 2005 meeting of the Committee on Care of Veterans with Serious Mental Illness (SMI), Dr. Lisa Rubenstein presented research findings on Translating Initiatives in Depression Into Effective Solutions (TIDES). The TIDES program is being carried out by VISNs 10, 16, 22, and 23 in partnership with VA health researchers in Los Angeles and Seattle to implement a proven depression collaborative care model in 7 VA medical center primary care practices. Through September 2004, primary care providers referred 458 veterans for depression screening. A nurse depression care manager followed veterans for 24 weeks providing assessment, casemanagement services and follow-up care. This was done in collaboration with mental health specialists. Of the 458 veterans identified for the study 80% stayed in primary care while 20% were followed by mental health. Collaborative care for depression is a highly evidence-based care model that improves the quality of care for depression in primary care but has rarely been sustained outside of research

projects. Currently 8% to 10% of veterans nationally suffer from depression. The findings clearly demonstrated that the veterans' depression was less severe and their functional status was improved dramatically. Along with VHA's clinical reminders and performance measures TIDES does improve outcomes for veterans with depression. There is currently a sub-study to look at long term cost effectiveness of TIDES collaborative care model.

Dr. Rubenstein recommended assistance in the expansion of the collaborative model to more VA sites which would be a preliminary step to a national dissemination rollout of the TIDES program that includes necessary information, materials and methods to support VISNs as learning organizations in the area of depression care improvement. The SMI Committee will be reviewing a recommendation for this program. For more information: [www1.va.gov/tides\\_waves/](http://www1.va.gov/tides_waves/)

## Operation Healthy Reunions

The National Mental Health Association (NMHA) has developed a web based resource for returning soldiers from Iraq and Afghanistan. *Operation Healthy Reunions* focuses on:

- ⇒ Post-Traumatic Stress Disorder
- ⇒ Returning to Work
- ⇒ How to Get Back to "Normal"
- ⇒ When the Letdown Doesn't Let Up
- ⇒ Being a Couple Again
- ⇒ Reconnecting with Your Children

There is practical advice for reconnecting with families and tips on returning to work. This gives information that can direct the soldiers to resources not only for themselves but their families.

Some of the practical advices for returning to work is:

- ⇒ Talk with others who have gone through the same process. Take advantage of Employee Assistance

programs if needed

- ⇒ Be aware of your rights that are included in the Employment and Re-employment Rights Act which include that permanent employees have reinstatement rights.

There are also tips for the employers such as:

- ◆ Create a welcoming environment
- ◆ Update the employee on the changes that may have taken place while they were deployed.
- ◆ Give time to readjust, recognizing that different people will have different reactions to being back at work.
- ◆ Support employees that are having a difficult time readjusting.

The practical advice can point both soldiers and their families in the right direction. See the web site at:

[www.nmha.org](http://www.nmha.org)

## Information and Resources

Choices in Recovery Newsletter

Get a copy by request at

[editors@choicesinrecovery.com](mailto:editors@choicesinrecovery.com)

Or write for a free copy: Choices in Recovery Newsletter, 2001 Hamilton Street, Suite 823, Philadelphia, PA 19130